

# MONTANA STATE HOSPITAL POLICY AND PROCEDURE

# INCIDENT RESPONSE AND REPORTING

Effective Date: February 20, 2003 Policy #: SF-04

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#### I. PURPOSE:

- A. To ensure prompt assessment and response to all incidents resulting in injury to patients, employees, or visitors. To accurately document incidents of property damage.
- B. To accurately document events and to identify staff response to the events.
- C. To identify contributing factors/conditions that led to the incident and to identify steps taken to prevent the recurrence of a similar incident.
- D. To provide accurate, timely information for an ongoing incident report database.

#### II. POLICY:

- A. Employees who witness or are aware of an incident are responsible for completing an Incident Report at the time they become aware of the incident.
- B. An Incident Report must be completed anytime there is an injury (regardless of severity) to patients, employees or visitors. An Incident Report must be completed in the event of damage to or loss of hospital and/or patient property. When possible, a photograph of damaged property must be attached to the Incident Report.
- C. An Incident Report must be completed whenever physical skills are used to move a patient to seclusion or restraints. All uses of the transport blanket must be documented on an Incident Report.
- D. All Incident Reports must be filled out completely including patient's hospital number, patient's unit, date of injury, time of injury, etc. When completing an Incident Report that involves an injury (or property damage) to a patient or employee resulting from another patient, the hospital number of the patient who caused the injury must be provided in the "Description of Incident" portion of the report.
- E. The actual incident report will not be noted in the patient's chart.
- F. Montana State Hospital's Environment of Care Coordinating Group will monitor and evaluate data generated by the reporting process as part of the Hospital's performance improvement activities.

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# III. DEFINITIONS:

A. <u>Incident</u> - Any unusual or unexpected occurrence that results in injury or potential injury to patients, staff, or visitors. Any event that results in damage or potential damage to or loss of hospital property, patient property or specified employee property.

#### IV. RESPONSIBILITIES:

All employees are responsible for safety and reporting safety concerns to their immediate supervisor as addressed in the Hazardous Condition Reporting Policy.

- A. <u>Safety Officer</u> will maintain a database of all Incident Reports at Montana State Hospital. All Incident Reports will be assigned a severity rating. Incident Reports will also be categorized according to type of injury. The Safety Officer will take appropriate action to decrease the potential for repeat incidents. The Safety Officer will coordinate with Montana State Fund to ensure appropriate management of worker's compensation claims.
- B. <u>Employees</u> must complete an Incident Report at the time they become aware of an incident. All Incident Reports must be completed prior to the end of the shift. Employees must notify their supervisor of all incidents before the end of the shift. An Incident Report must be completed for all patient, staff or visitor injuries, regardless of severity.
- C. <u>Licensed nurses</u> must assess the injury and administer first-aid as necessary. Injured employees can be referred to Med Clinic during normal business hours. Employees can also be referred to medical providers in the community. Nurse Supervisors must be notified of all incidents before the end of the injured employee's shift.
- D. <u>Nurse Supervisors/Immediate Supervisors</u> must complete the "Supervisors Investigation" portion of the Incident Report and must take steps to ensure all Incident Reports are forwarded to the Safety Officer within two working days. When possible, the nurse supervisor must take immediate action to prevent recurrence. A copy of related work orders must be attached to the Incident Report.
- **V. PROCEDURE:** An Incident Report must be completed anytime a patient, employee or visitor is injured regardless of severity. An employee who witnesses an incident must complete the Incident Report. In the event of an unobserved injury, the employee who first becomes aware of the injury must complete an incident report.

# A. Patient Injury:

1. Notification process and first response:

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- a. Regardless of severity, employees must immediately notify the registered nurse or licensed practical nurse assigned to the patients treatment unit.
- b. A licensed nurse must assess the patient's injury and administer First Aid as indicated.
- c. Employees must notify the Nurse Supervisor who will determine the necessity for further intervention; i.e., notification of physician.

# 2. <u>Documentation process</u>:

- a. An employee observing or responding to the incident must complete and sign an Incident Report Form (see attached form) and document information about the incident in the Progress Notes of the patient's medical record.
- b. The licensed nurse must document the following on the Incident Report Form <u>and</u> in the Progress Notes:
  - assessment
  - emergency care administered
  - persons notified and time this occurred
  - any needed follow-up
- d. Following assessment of the patient, the physician will document the following on the Incident Report Form and in the Progress Notes:
  - observations
  - treatment provided
  - plan for follow-up care
- e. The Nurse Supervisor or designee must complete the Investigation section of the Incident Report Form.
- f. The Supervisor will review the completed Incident Report Form and route to the Safety Officer within twenty-four hours of the incident during normal workdays and the next workday following weekends and holidays.

# B. **Employee Injury**:

# 1. Notification and first response:

a. The employee's immediate supervisor must be notified of all employee injuries at the time of the injury – regardless of severity.

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- A licensed nurse or physician may also assess the employee and determine how best to proceed. The employee may also be referred to the Medical Clinic.
- c. The employee's department supervisor must be notified as soon as possible.

#### 2. Documentation process:

- a. Injured employees must complete and sign the Incident Report Form (see attached) at the time of the injury.
- b. The employee's supervisor, (Program Supervisor, Nurse Supervisor, or Department Supervisor) must complete the Investigation portion of the Incident Report Form before the end of the shift.
- c. The immediate supervisor must complete the Incident Report if an injured employee is unable to do so.
- d. When a registered nurse and/or physician assess the employee, they must document their findings on the Incident Report Form.
- e. The completed Incident Report Form must be sent to the Safety Officer within twenty-four hours of the incident.

# C. Visitor Injury:

# 1. Notification and first response:

- a. Regardless of severity staff must complete an Incident Report and notify a registered nurse or licensed practical nurse.
- b. A licensed nurse will assess the visitor's injury and administer First-Aid as indicated.
- c. The licensed nurse must notify the Nurse Supervisor who will determine the necessity for further intervention; i.e. notification of a physician.
- d. The Hospital Administrator and Medical Director must be notified of all visitor injuries.

# 2. <u>Documentation process</u>:

a. Employees who observe or respond to an incident must complete and sign an Incident Report Form.

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- b. A licensed nurse and/or physician must assess the visitor and document the following on the Incident Report Form:
  - observations
  - treatment given, and
  - any plan for follow-up care.
- c. The Nurse Supervisor, Program Supervisor or Department Supervisor (depending on location of incident) must complete the Investigation portion of the Incident Report.
- d. Completed Incident Report Forms will be routed to the Safety Officer within twenty-four hours of the occurrence.
- e. The Safety Officer will fax a copy of visitor Incident Reports to the Division Administrator.

# D. <u>Emergency Care/Transportation</u>:

Emergency assessment and care will be the first priority for all patient, employee and visitor injuries. A licensed nurse and/or physician will be available to assess all injuries. If injuries require emergency transportation to an acute medical facility, arrangements will be made via the Nurse Supervisor or Staffing Services. The contracted ambulance service may be utilized to provide emergency transportation. In an emergency situation any MSH employee(s) may transport an employee, patient or visitor to a medical facility. The Nurse Supervisor must authorize employees transporting anyone to a medical facility.

# E. Damage/Loss of Personal Property:

Instances of damage to or loss of personal property will be managed according to Montana State Hospital's policy "Reimbursement for damage/destruction of Hospital Property."

# F. Data Collection and Analysis:

- 1. The Safety Officer will indicate the date when the Incident Report was received on the form and enter information from each occurrence into a database. The database will include date, shift, time, location, severity and type of occurrence as well as information about patients and staff involved.
- 2. Information contained in the database will be summarized and reviewed by the Safety Committee and a summary report will be given to the Quality Improvement Committee.

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VI.	REFERENCES:		
	MSH Policy "Hazardous Condition Reporting Policy" MSH Policy "Reimbursement for Damage/Destruction of Hospital Prop MSH Policy "Personally Owned Articles Brought to Montana State Ho Personnel" MSH Policy "Workers Compensation"		
VII.	<b>COLLABORATED WITH:</b> Hospital Administrator, Director of Nursing Services, Director of Quality Improvement & Public Relations, Staffing Services		
VIII.	<b>RESCISSIONS:</b> SF-04, <i>Incident Response and Reporting Policy</i> dated February 14, 2000; #AD-05-01, <i>Incident Response and Reporting Policy</i> , dated July 10, 1995		
IX.	<b>DISTRIBUTION:</b> All hospital policy manuals		
X.	REVIEW AND REISSUE DATE: February 2006		
XI.	FOLLOW-UP RESPONSIBILITY: Safety Officer		
XII.	ATTACHMENTS: A. Incident Report Form		
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Ed An Hospit	nberg Date Connie Worl ral Administrator Director of QI and PR	Date	